

LIBRARY NOTES

*MEDICAL LIBRARIES AND MEDICAL HISTORY**

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Medical libraries play an important role in the history of medicine, for the library has always been the parent of historical study. Through the library the records of the past have been preserved and historical research made possible. Through the library such study has been fostered and stimulated. In earlier days only those who made scholarship their career had the leisure and the necessary background, while in the cloistered halls with manuscripts chained to desks, welcome was accorded to a privileged few. The introduction of printing, the publication of texts in the vernacular, the vast increase in the number and size of libraries, has made historical study available to everyone.

Time, however, is even now an obstacle to all but the professional historian, and it is as much a problem to most medical librarians as it is to the busy physician. Few can spare more than a fraction of their time away from the pressure of current or routine duties. Yet for the library to play its proper part, time of both medical man and librarian must be consumed. Only through such coöperation can their aims be realized.

In the building of a collection of books, it is with the advice of those who are to use them that the librarian can achieve the best results. Every library, large and small, indicates in its holdings a line of development, but this must be coördinated with the needs of its readers. Every want can of course not be satisfied, but each suggestion is welcomed and considered. The physician interested in the history of his

specialty can better determine the value of a contribution to it, while the librarian in reading secondhand book catalogues can bring to his attention desirable items offered for sale which might be wanted for his personal library. Through such joint assistance competition may be avoided and the librarian will not duplicate volumes expected at a future date to be presented to the library.

The physician, too, can help the librarian in a plea for the preservation of the memorabilia often carelessly hidden away in homes of the families or descendants of physicians. These, the records of today, will be as valuable to the historians of this era as the documents of past centuries are to those of earlier periods. Too often correspondence, minutes of medical organizations, documents, diaries, announcements and advertisements of seemingly ephemeral interest, have been discarded or relegated to musty attics. The historian realizes that the most unimportant item may have utmost value to the writer of tomorrow, and it should be the responsibility of both librarian and physician to publicize the necessity of preserving such records and depositing them in the library. The paper salvage drive has unfortunately swallowed up much that should have long since been rescued, but there must be more remaining to reward the efforts of the persistent. Important, too, is the attitude of the librarian toward proffered gifts. The Academy Library recently received extremely interesting autograph letters of important medical men of the early nineteenth century

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because a university librarian to whom they had first been offered was not properly appreciative. The only possible excuse for not welcoming donations of that kind is the constant problem of every library, lack of space. But surely no additional space will be granted until the urgency of the need is overwhelmingly obvious. There are gifts, of course, that would be out of place in a collection, but a suggestion of a more appropriate depository would convince the donor that the rejection was not based upon a lack of interest, and more fitting offers might be forthcoming.

No medical man of the past is so obscure, no book, pamphlet, or document so worthless that they merit oblivion. Too many of our predecessors were not of this opinion, much to the loss of the libraries. One who saw into the future more wisely than most of his contemporaries was the patron of the Academy Library, Dr. Samuel Smith Purple. On our shelves are hundreds of bound volumes of pamphlets which he saved from destruction. These include many American medical theses, a large number published before 1800, contributions by Samuel Bard which are of some rarity today, articles by Samuel Latham, Mitchill, Benjamin Rush, David Ramsay, Charles Caldwell and others, besides eighteenth and early nineteenth century tracts by English writers.

I would like to quote from an address delivered by Dr. Purple before the Academy in 1877.¹ His words may be familiar to some of you, but surely they bear repeating.

"A popular error exists in the profession, and it has done much to retard the establishment of a good reference medical library in this city. There are not a few who believe that only the best books and latest editions are worth preserving. This idea has tended greatly to retard the growth of our own Library during even the past two years. No book or pamphlet is worthless; every waif from the mental laboratory of the practical physician contains a fact, or, it may be a statement of facts, which, however darkly concealed or obscured by peculiarities of language or description, will

ultimately be unearthed, and serve the genius of practical medicine or medical history. In illustration of the truth of this statement, witness the recent disclosure which your speaker made, first in the Section on Obstetrics and the Diseases of Women and Children, and afterward in this Academy, that more than a century since, Drs. Colden and Bard described here epidemics of diphtheria—the scourge of our city in these days.

"The description of this disease by Dr. Cobden, in 1753, lies concealed in a somewhat scarce and neglected publication of a long since extinct medical society of London; whilst the description of the epidemic of this disease in this city, in 1770, by Dr. Samuel Bard, is contained in this little brochure which your speaker rescued from the press-box of a second-hand paper-dealer in this city *in transitu* to the maw of a paper-mill. Its former owner had sold it for the eighth part of a cent, or at the rate of two cents per pound . . .

"Will any Fellow of this Academy, from this time forward, despise the day of small things, or consign to collectors of rags or paper stock the pamphlets, or old editions of medical works, which he may weed from his library or garret? Will not all bear in constant remembrance that here, in this our own Medical Home, will be gratefully received and carefully treasured every tract, pamphlet, book, manuscript, engraving, portrait, small or great, which may be donated?"

The Academy Library cannot show gratitude enough to Dr. Purple. His efforts in salvaging medical material are not his only contribution. His library, which included 5,000 volumes of American medical journals, was bequeathed to the Academy and served as the nucleus of the collection. His notations, sometimes in separate manuscripts, are of great use to us today. One volume is consulted frequently by those interested either in the first years of the Academy or in the New York medical men of that period. On each page is the name of a founder of the Academy. In Dr. Pur-

¹ Purple, S. S. *Medical libraries* . . . New York, 1877, pp. 18-19, 25-26.

ple's hand are brief biographical notes, references to obituaries or other biographical sketches, and occasionally newspaper clippings containing obituaries. Some give scanty information, but may cite the only record we possess of the men in question. Other of his manuscripts include biographies of well known physicians, a short bibliography of American doctors and their writings, a bibliographical account of the medical periodical literature of the United States, a chronological list of medical periodicals in his own library covering the years 1797 to 1857, and a list of organizing members and Presidents and Vice-Presidents of the Medical Society of the State of New York.

Few physicians today have Dr. Purple's leisure or his devotion to the world of books, but the far reaching effects of his services to this Library can indicate to those interested in medical libraries or medical history, paths along which they might choose to follow.

The building of a useful collection, is of course only half the battle. The value of any collection can be judged solely by its use, and since the number actively interested in the history of medicine is small, the resources of the library of medical history are seldom fully utilized. The library can play a large part in stimulating the study of history, although discouragement may often be the reward. Statesmen, economists, lawyers, military strategists, must have knowledge of the history of their professions, but the majority of scientists feel that only the new is worthy of attention. A few years ago an editorial in the bulletin of an English hospital noted that a recent gift was the only book on the history of medicine in the hospital library and remarked that it would be well to add a few more of the standard works and to introduce a few lectures on the subject. This mild suggestion provoked an immediate response in which the writer inveighed against investing "time and energy in a subject that did not give a profitable return." He said, "There can be no possible use in knowing anything about Bright or Addison or Lugol, nor in any of the

dilettante frills that so please those who possess them."² This attitude is unfortunately shared by many, and the librarian who meets it frequently must wonder just how much time may be spared for such "dilettante frills," and how far he should go in trying to arouse interest in them.

It is obvious that those who are strongly against historical study are not apt to be influenced by any efforts in that direction, but there are those who, although they favor having an historical collection, feel that old volumes are merely curios or museum pieces, relics of an ignorant past. These and the medical students make up the audience that might be swayed, might profit by having historical material brought to their attention. As in advertising, "eye appeal" is surely the most successful bait. The man who passes unheeding by the carefully prepared exhibit which took hours of study and research, will pause before a small display arranged in a prominent spot with suitable illustrations and not too much text. New accessions may be shown, or descriptions of them mimeographed and circulated, such as Dr. McDaniel's informative and delightful "Fugitive leaves." Recent gifts should receive proper publicity. Reprints of articles by members of the organization may awaken the interest of their colleagues. Accounts of the activities of other organizations may also provide incentive. Dr. Sigerist in his report of the activities of the Institute of the History of Medicine for 1943/44, describes their exhibits for that year. He lists three types: the scientific exhibits; the monthly student exhibits which correlated the history of medicine with current events, through such subjects as Salerno in medicine, Sicily in medicine, etc.; and the book of the week exhibits which showed either a new book of particular interest, a new accession, or a publication of a member of the faculty. Every librarian cannot find the time for such a varied program, but surely some effort can be made in that direction.

The real work of the librarian, however, should begin with the new enthusiast.

² *St. Thomas hospital gazette*, 1940, vol. 38, pp. 59, 121.

Whether medical student or practising physician, the novice in the field of history is in need of assistance which the librarian can easily supply. The casual student may be satisfied with a few readable volumes. The serious student, and there will never be many, must go on from there. The first thing he must learn is the importance of original sources. He must be taught to consult them whenever they are available. He must be made to realize that no historian is infallible; that no source but the original is to be relied upon; that every fact must be documented; that every bibliographical reference must be clear, complete and specific, citing author, title, imprint, volume and page. Above all he must learn the necessity of accuracy. Dr. Sarton writes, "The main point to emphasize . . . is that accuracy is as fundamental in the historical field as in the scientific one, and that it has the same meaning in both fields . . . Most of the historical work done by scientists untrained as historians is published without means of verification, that is, with insufficient or imperfect references, and with so little accuracy that it is useless for later scholars . . . Such work is obviously a waste of time for all concerned. It can add nothing to our knowledge."⁸ Dr. Sarton does not add that later scholars may not be the only sufferers, for the historian himself may at a future date wish to check his sources. Then he must retrace his steps, a difficult and time-consuming chore after a lapse of time.

The next step for the beginner is to become familiar with the necessary reference tools. Here, too, the librarian can render the utmost service. For a rich heritage awaits the medical historian. History, biography, bibliography. In each field medical men have left enduring monuments. No subject has been more thoroughly covered. In the field of bibliography it is outstanding. In fact, the father of bibliography was a physician. The handsome folios containing Conrad Gessner's extraordinary work were published in 1545 and 1548. Today they

stand upon our shelves, not alone as a tribute to Gessner's industry, but also as useful books of reference. The *Bibliotheca universalis*, covering all existing literature, is no simple list of authors and titles, but an annotated catalogue often giving brief biographical notes, detailed contents, quotations from the authors' prefaces, the imprint, the number of chapters, and the source of his information. He may indicate that a volume was noted in Champier's *De scriptoribus medicinae* or in Tritheim's *Catalogus ecclesiasticorum scriptorum*, or he may mention the particular library in which he examined a copy of the book in question. Bibliographers of today can look with awe upon this tremendous compilation.

Gessner was succeeded by medical men of equal industry who confined their attention to the subject of medicine. Manget who brought out many large volumes in the early eighteenth century often quoted extensively from the original texts. Haller later in the century cited obscure texts and scarce editions overlooked by other bibliographers. Ploucquet in 1793-9 provided an extensive index of medical literature by subject, including references to case histories in the sixteenth century *Consilia* and to articles in the early scientific journals. In the years 1830 to 1845 appeared a thirty-three volume catalogue of recent medical publications, arranged by author and compiled by the Danish physician, Callesen.

These are but the most outstanding achievements in medical bibliography. There are many others over the centuries which make contributions to the subject. Together they comprise a vast amount of valuable material, material which has necessarily lost some of its glory in the shade of the work most vital to any medical library, the *Index-Catalogue*. Billings may be remembered as the last of the giants of medical bibliography, for through his efforts and those of his successors at the Army Medical Library no one need embark upon the impossible task of listing the ever increasing and voluminous mass of medical literature. Today bibliographers can limit

⁸ Sarton, G.A.L.. *The study of the history of science*, Cambridge, Mass., 1936, pp. 10-11, 46.

themselves to subjects of less general scope, such as the detailed descriptions of editions of the writings of one author, so well exemplified in the books by Dr. Keynes, Dr. Fulton and Miss Doe, or of one specific subject, such as Schmid's bibliography of pathological anatomy.

Medical history and biography have been no less well served. As Dr. Malloch has pointed out⁴, it is only when the medical historian investigates subjects outside his particular field that he can appreciate the vast bibliographical and historical resources of his own. The novice may well be bemused and bewildered when he is faced with this literature for the first time, and the librarian is needed to show the way. Obviously no catalogue, however detailed, can offer adequate descriptions. The catalogue must be supplemented by the librarian's familiarity with the contents of his collection, by his intimate knowledge of the value of different volumes and by his imagination, a quality which should never be underestimated in historical research. Imagination and persistence are the most necessary qualities for both librarian and historian. Imagination can direct them to the less obvious sources where the needed information may lurk unsuspected. Persistence spurs them on when the discouragement of unsuccessful search fails to turn up a small but important detail. For the true historian realizes that history is but the amassing of one small fact after another, dull perhaps to the facile interpreter who is satisfied to base his calculations upon the work of others. But the historian knows that the discovery of any fact, no matter how insignificant, is an indisputable contribution. He knows, too, that the pursuit of such a fact may entail a chase as interesting as that of a detective in search of a criminal or the hunter in search of his prey. It is in guiding his initial steps along these lines that the librarian can best serve the historical collection.

In making plans for the post-war world we hear so much about, it is clear how the librarian can chart the proper course. The physician, too, can look ahead. It is to be hoped that in peace time more medical schools will offer courses in the history of medicine, or if not, that courses on various medical subjects may be introduced by historical summaries. Then the professor can urge his student to visit the historical collection, perhaps even to write a brief paper on some specific phase of the subject. The more specific his topic, the more will he learn, the more fully can he treat it. In this way, and with the librarian's help, the student becomes familiar with the historical books and their use.

Some method should be devised for the rousing of the physician as well as the student. A most profitable and workable solution might be the organization of a board of consultants, a board composed not of two or three men, but of a larger group, on whom the librarian could rely for occasional assistance. A physician might be selected from each medical specialty, one who had some interest in its history. The librarian would then be able to turn to members of this group when emergencies arose, and the men would surely feel active partners in the development and operation of the library. This is as it should be. I am sure that many physicians would be glad to give of their time and knowledge but hesitate lest the librarian resent intrusion or criticism, while the librarian often feels presumptuous at the thought of interrupting a busy man's practice.

The medical library exists for the medical man and he should learn that the more he contributes to it, the better it will serve him. The historian, completely dependent upon the library for his tools should be even more aware of this. Mutual effort on the part of physician and librarian can achieve our ideals, but neither one nor the other can succeed alone, and this should be given due thought in our many plans for the not too distant future.

⁴ *Bulletin of the Johns Hopkins Hospital*, 1930, vol. 46, p. 61.